

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	lw	68904	5/31/00
O.I.P.E. CLASSIFIER	GL	11	5/15/00
FORMALITY REVIEW	my	827	02-18-00
RESPONSE FORMALITY REVIEW	LIT	60105	4-13-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	3/7/03
2	3/7/03
3	3/7/03
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50	3/7/03

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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